

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Substitute for form 1449A/PTO  <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  (use as many sheets as necessary)				<b>Complete if Known</b>	
				Application Number	
				Filing Date	
				First Named Inventor	
				Group Art Unit	
				Examiner Name	
Sheet	1	of	1	Attorney Docket Number	
				16NM02038	

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	U.S. Patent Document		Name of Patentee or Applicant Of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code <sup>2</sup> (if known)			
	AA	6,577,884		Boas	Jun. 10, 2003	
	AB	6,516,214		Boas	Feb. 4, 2003	
	AC	6,430,430		Gosche	Aug. 6, 2002	
	AD	6,298,259		Kucharczyk et al.	Oct. 2, 2001	
	AE	6,205,235		Roberts	Mar. 20, 2001	
	AF	5,749,362		Funda et al.	May 12, 1998	
	AG					
	AH					
	AI					
	AJ					
	AK					
	AG					
	AH					
	AI					
	AJ					
	AK					
	AL					
	AM					
	AN					
	AO					
	AP					
	AQ					

FOREIGN PATENT DOCUMENTS								
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document			Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T 6
		Office <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)				
	FA							
	FB							
	FC							
	FD							

OTHER PRIOR ART - - NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the Items (book, magazine, journal, serial, symposium, catalog, etc.), data, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Examiner Signature		Date Considered:	
-----------------------	--	---------------------	--

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Unique citation designation number. <sup>2</sup>Applicant is to place a checkmark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.